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November 10, 2004

**GROUP: 1635****FAX NUMBER: 1-703-872-9307****ATTORNEY DOCKET NO.: RTS-0325****SERIAL NO.: 10/016,149****FILED: November 1, 2001****CUSTOMER NO.: 32862****CONFIRMATION NO.: 4677****NUMBER OF PAGES: 10**  
(including this sheet)**MESSAGE:** Attached is an Amendment Transmittal Letter (in duplicate) and  
Amendment in response to Final Rejection dated August 10, 2004.**URGENT! PLEASE DELIVER IMMEDIATELY UPON RECEIPT. THANK YOU!**

\* \* \* \* \*

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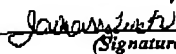
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<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>					Docket No. RTS-0325	
Applicant(s): Bennett and Wyatt						
Application No. 10/016,149	Filing Date November 1, 2001	Examiner James Schultz	Customer No. 32862	Group Art Unit 1635	Confirmation No. 32862	
Invention: ANTISENSE MODULATION OF PHOSPHOLIPASE A2 GROUP V EXPRESSION						
<b>COMMISSIONER FOR PATENTS:</b>						
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.						
<b>CLAIMS AS AMENDED</b>						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	11 -	20 =	0 x	\$18.00	\$0.00	
INDEP. CLAIMS	1 -	3 =	0 x	\$84.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0.00</b>	
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 50-1619 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038.						
<b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>						
_____ Signature			Dated: November 10, 2004			
Jane Massey Licata Reg. No. 32,257 Licata & Tyrrell P.C. 66 E. Main Street Marlton, NJ 08053 Tel: 856-810-1515 Fax: 856-810-1454			I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____ _____ (Date) _____ Signature of Person Mailing Correspondence _____ Typed or Printed Name of Person Mailing Correspondence			
CC:						

NOV 10 2004

<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>					Docket No. RTS-0325	
Applicant(s): Bennett and Wyatt						
Application No. 10/016,149	Filing Date November 1, 2001	Examiner James Schultz	Customer No. 32862	Group Art Unit 1635	Confirmation No. 32862	
Invention: ANTISENSE MODULATION OF PHOSPHOLIPASE A2 GROUP V EXPRESSION						
<b>COMMISSIONER FOR PATENTS:</b>						
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.						
<b>CLAIMS AS AMENDED</b>						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	11 -	20 =	0 x	\$18.00	\$0.00	
INDEP. CLAIMS	1 -	3 =	0 x	\$84.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0.00</b>	
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 50-1619 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038. <b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>						
Jane Massey Licata Reg. No. 32,257 Licata & Tyrrell P.C. 66 E. Main Street Marlton, NJ 08053 Tel: 856-810-1515 Fax: 856-810-1454			Dated: November 10, 2004  _____ Signature			
CC:			I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____ _____ (Date)			
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			_____ (Date)			

<b>CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)</b>			Docket No. RTS-0325
Applicant(s): Bennett and Wyatt			
Application No. 10/016,149	Filing Date November 1, 2001	Examiner James Schultz	Group Art Unit 1635
Invention: ANTISENSE MODULATION OF PHOSPHOLIPASE A2 GROUP V EXPRESSION			
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I hereby certify that this <u>Reply under 37 C.F.R. 1.116</u> (Identify type of correspondence)			
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on <u>November 10, 2004</u> (Date)			
<u>Jane Massey Licata</u> (Typed or Printed Name of Person Signing Certificate)			
<u></u> (Signature)			
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**RESPONSE UNDER 37 CFR 1.116  
EXPEDITED PROCEDURE  
EXAMINING GROUP 1635****IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Attorney Docket No.: **RTS-0325**  
Inventors: **Bennett and Wyatt**  
Serial No.: **10/016,149**  
Filing Date: **November 1, 2001**  
Examiner: **James Schultz**  
Customer No.: **32862**  
Group Art Unit: **1635**  
Confirmation No.: **4677**  
Title: **Antisense Modulation of Phospholipase A2  
Group V Expression**

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the date shown below.

On November 10, 2004

Jane Massey  
Jane Massey Licata Registration No. 32,257

Assistant Commissioner for Patents  
Washington, D.C. 20231

Dear Sir:

**Reply under 37 C.F.R. 1.116**

This is a reply to the Office Action mailed August 10, 2004  
setting a three (3) month statutory period for response. Please  
enter the following amendments and remarks into the record.

**Amendments to the Claims** begin on page 2 of this paper.

**Remarks** begin on page 4 of this paper.

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